

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Conservatives Fund			FEC IDENTIFICATION NUMBER ▼ C C00448696		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			<div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> </div>		
Full Name of Payee Senate Conservatives Fund			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">03</div> / <div style="border: 1px solid black; padding: 2px;">08</div> / <div style="border: 1px solid black; padding: 2px;">2014</div></div> </div>		
Mailing Address PO Box 388			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2349.75</div>		
City Alexandria		State VA	Zip Code 22313-0388		
Purpose of Expenditure IE-Bevin-Online Processing		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>		Transaction ID : E178F0C4F0F984E07A3C Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">03</div> / <div style="border: 1px solid black; padding: 2px;">08</div> / <div style="border: 1px solid black; padding: 2px;">2014</div></div> </div>	
Name of Federal Candidate Matthew Griswold Bevin			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: KY		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">230378.77</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Allegiance Direct LLC			Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">03</div> / <div style="border: 1px solid black; padding: 2px;">10</div> / <div style="border: 1px solid black; padding: 2px;">2014</div></div> </div>		
Mailing Address 421 E E St			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17211.20</div>		
City Purcellville		State VA	Zip Code 20132-3320		
Purpose of Expenditure IE-Bevin-Direct Mail Production		Category/Type <div style="border: 1px solid black; padding: 2px;"></div>		Transaction ID : EBF3E214853324CB49B9 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">03</div> / <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">2014</div></div> </div>	
Name of Federal Candidate Matthew Griswold Bevin			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: KY		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">247589.97</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;">19560.95</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
<i>Paul Kilgore</i> Signature			Date <div style="display: flex; justify-content: space-between;"> <div><div style="border: 1px solid black; padding: 2px;">M M M</div> / <div style="border: 1px solid black; padding: 2px;">D D D</div> / <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div></div> <div><div style="border: 1px solid black; padding: 2px;">03</div> / <div style="border: 1px solid black; padding: 2px;">11</div> / <div style="border: 1px solid black; padding: 2px;">2014</div></div> </div>		

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NAME OF COMMITTEE (In Full) Senate Conservatives Fund	FEC IDENTIFICATION NUMBER ▼ C C00448696
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Jamestown Associates			Date of Public Distribution/Dissemination MM / DD / YYYY 03 / 11 / 2014		
Mailing Address 5 Mapleton Rd Ste 300			Amount 27130.00		
City Princeton	State NJ	Zip Code 08540-9646	Transaction ID : EE32C7BC285764222B79		
Purpose of Expenditure IE-Bevin-Radio Advertising		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 03 / 10 / 2014		
Name of Federal Candidate Matthew Griswold Bevin		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: KY		
Calendar Year-To-Date Per Election for Office Sought		274719.97	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee			Date of Public Distribution/Dissemination MM / DD / YYYY		
Mailing Address			Amount		
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY		
Purpose of Expenditure		Category/Type			
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	27130.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	46690.95

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

*Paul Kilgore**[Electronically Filed]*

Date

MM / DD / YYYY
03 / 11 / 2014

Signature